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**FACSIMILE TRANSMITTAL SHEET AND
CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8**

TO: Examiner Elizabeth M. Cole - United States Patent and Trademark Office

Fax No. 703-872-9310

Phone No. 703-308-0037

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on Monday, June 2, 2003, to the above-identified facsimile number.

Teresa A. Wert (Signature)

FROM: Teresa A. Wert (Office of C. Brant Cook)

Fax No. 513-634-3612

Phone No. 513-634-3114

Listed below are the item(s) being submitted with this Certificate of Transmission:**

- 1) Amendment in Response to Office Action dated 5/1/03 (7 pgs.)
- 2) Fee Amendment Transmittal (Orig. & Copy)
- 3)
- 4)

Number of Pages Including this Page: 10

Inventor(s): Nicholas James Nissing

S.N.: 09/957,408

Filed: September 20, 2001

Case: 7005R

Comments:

**Note: Each paper must have its own certificate of transmission, OR this certificate must identify each submitted paper.

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June 2, 2003

Teresa A. Wert
Name: _____
Signature: Teresa A. Wert

IN THE UNITED STATES PATENT & TRADEMARK OFFICE
RESPONSE/AMENDMENT

Case Docket No. 7005R

Mail Stop Fee Amendment
Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an AMENDMENT for the patent application:

Inventor(s): Nicholas James Nissing Confirmation No.: 4734

Serial No.: 09/957,408 Group Art Unit: 1771

Date Filed: September 20, 2001 Examiner: Elizabeth M. Cole

Title: A Disposable Article With Enhanced Texture

1. ☐ No additional fee is known to be required.
2. ☒ The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA*	RATE	FEE
TOTAL	* 21	MINUS	** 20	= 1	x \$18 =	\$18.00
INDEP.	* 3	MINUS	*** 3	= 0	x \$84 =	\$0.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$280 =	\$
					TOTAL	\$18.00

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the highest number of total claims previously paid for is less than 20, write "20" in this space.

*** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

3. ☐ The Commissioner is hereby petitioned under 37 CFR §1.136(a) to grant any extension of time needed for timely response to the Office Action dated in the above-identified application to preserve pendency of said application. The processing fee under 37 CFR §1.17 has been determined as follows: \$ for a -month extension of time.
4. The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-2480. A duplicate copy of this sheet is attached.
 - a. ☒ Any patent application processing fees under 37 CFR §1.16.
 - b. ☒ Any patent application processing fees under 37 CFR §1.17.
5. The Commissioner is hereby authorized to make any additional copies of this sheet needed to accomplish the purposes provided for herein and to charge any fee for such copies to Deposit Account No. 16-2480.

Date: June 2, 2003
Customer No. 27752

(last revised 4/7/2003)

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